DOCUMENT NAME: Blanket Purchase Agreement (BPA) for Household Goods Shipment DAFIS DOCUMENT TYPE: 17

1. **Description:** Used for repetitive services from local carriers in connection with a GBL for unaccompanied baggage on PCS moves. Calls are placed against the existing BPA.

2. Primary Forms: CG-5398 (or OF-347), Order for Supplies or Services

3. Related Forms: *CG-5131, Standard Travel Order For Military Personnel

*DD-214, Certificate of Release or Discharge from Active Duty DD-1299, Application for Shipment and/or Storage of Personal

Property

BPA Call Record Sheet

*Authorization Letter for Retirement

Note: *One of these will apply to each shipment on a BPA.

4. Document Number:

Note: The document number will only appear on call record sheet. Block 4 of the CG-5398 (or OF-347) should be blank.

a. The TONO number from the PCS orders will be used for the document number.

SAMPLE: 1794234P12345

Document FY Last nine
Type Funded digits of TONOSuffix

17 94 234P12345

b. For PCS move supported by DD-214, member's Social Security Number is used in lieu of TONO.

SAMPLE: 1794123121234

Document FY Member's Social Security NumberSuffix

17 94 123121234

Note: The suffix will be assigned by FINCEN. FINCEN will use D0_, the last digit corresponding to month service was provided, D01-OCT, D02-NOV, etc.

5. Accounting Line: Will be recorded on Call Record Sheet for each shipment. Different lines of accounting are allowed on one call record sheet. Unit must provide accounting line for each shipment.

SAMPLE: 2/P/401/299/22/0/22/78040/2221

6. FINCEN Critical Processing Requirements:

a. Units must ensure the following information is provided on completed OF-347's:

- (1) DTCG number block 3.
- (2) Five digit OPFAC of Contracting Office block 5.
- (3) Unit name, address, and phone number blocks 5 and 6.
- (4) Vendor name and address block 7.
- (5) Shipping terms block 12.
- (6) Block 17 MUST contain a general description of supplies or services to be provided, the specified time period of the agreement, the dollar limitation of each individual purchase, a list of individuals authorized to purchase under the BPA (title or position or name of the individual), vendor invoicing/delivery ticket instructions.
- (7) Proper Mail To: instructions Document Type 17 (Non TR/GBL), USCG Finance Center, P. O. Box 4114, Chesapeake, VA 23327-4114 block 21.
- (8) Contracting Authority signature block 23.

COPIES OF DOCUMENTS SUBMITTED MUST BE LEGIBLE AND INCLUDE ALL PAGES OF THE ORDER.

- b. Call record sheets must be submitted to provide receiving report information and document number identification for BPA purchases. The following information must be provided:
 - (1) Vendor name.
 - (2) DAFIS document number.
 - (3) Date and number of call.
 - (4) Signature of caller.
 - (5) Brief description of delivery ticket number.
 - (6) Authorized amount.
 - (7) Accounting data.
- c. Units must promptly forward call sheets to facilitate FINCEN receipt by the 5th work day following the end of the billing period.

COPIES OF DOCUMENTS SUBMITTED MUST BE LEGIBLE

7. Other Information: None.

8. LUFS Information:

- a. Obligation will transmit electronically via LUFS.
- b. A copy of the form should be mailed to FINCEN and should have the statement on the face of the document.

"OBLIGATION TRANSMITTED ELECTRONICALLY VIA LUFS"

c. When transmitting to FINCEN only the obligation accounting information (XA record) will be sent.

9. Document Flow:

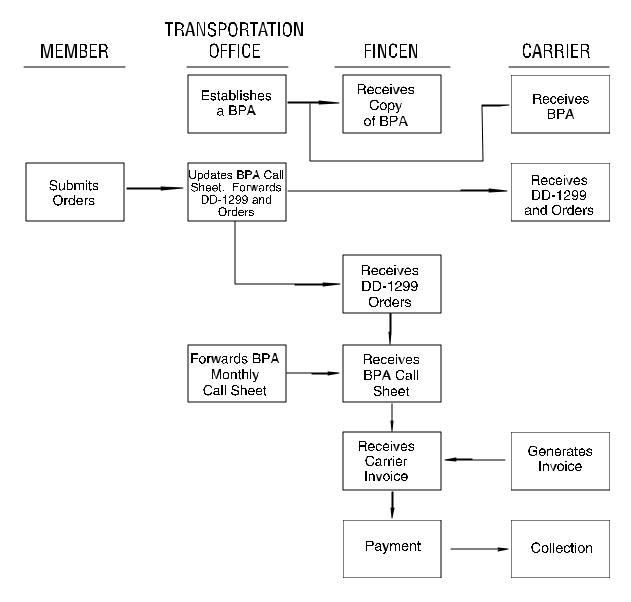


Figure 12C-34 Blanket Purchase Order for Household Goods Shipment

9. a. Figure 12C-34 describes the procedures for processing Blanket Purchase Order for Household Goods Shipment.

- b. Blanket purchase agreement is established between transportation office and the carrier. Copies are sent to the carrier and Document Type 17 (Non TR/GBL), USCG Finance Center, P. O. Box 4114, Chesapeake, VA 23327-4114.
- c. The member submits sufficient copies of orders to satisfy distribution requirements to the transportation office.
- d. Transportation office calls vendor for shipment, updates call record sheet, and forwards DD-1299 and orders to carrier and Document Type 17 (Non TR/GBL), USCG Finance Center, P. O. Box 4114, Chesapeake, VA 23327-4114.
- e. Carrier forwards necessary documents to FINCEN for payment.
- f. Transportation office forwards record call sheet to Document Type 17 (Non TR/GBL), USCG Finance Center, P. O. Box 4114, Chesapeake, VA 23327-4114 on monthly basis.
- g. FINCEN matches call record sheet information with vendor invoice and processes for payment.
- **10. Sample Forms:** See Figures 12C-35 and 12C-36.

11. PES Report Sample:

	TRANS	BATCH	COST	OBJ		UNDELIVERED	ACCRUE	D
DOCUMENT ID	CODE	NUMBER	CENTER	CLASS	COMMIT	ORDERS	EXPEND	EXPEND
1794234P12345D01	103F	94100F242	78040	2221	0.00	0.00	0.00	65.00

12. References:

- a. COMDTINST M4050.6, Coast Guard Personal Property Transportation Manual.
- b. COMDTINST M4600.12, Travel Manual.
- c. Joint Federal Travel Regulations, Volume I.

DEPARTMENT OF TRANSPORTATION U.S. COAST GUARD CG-1131 (Rev. 8-84)	STA	DA	TE					
SUPERINTENDENT	r, U.S. COAST GUARD A	CADEMY	am erinn	1, TRAVE	LONDER	NO.		
	the, 123-12-1234	ig dalladi		CIC-G	129	4234P12345		
VIA.		5 3 L	Contract of	COMDT MSG 020023Z APR 94				
3. PROCEED AND REPOR	T IN THE ORDER LISTED BELO STATION/PLACE	w.	NATURE OF	DI IEN		PORTING TIME/DATE		
COMMANDING OF			PASDU	0011	ni ci	PORTING TIME/DATE		
COMMANDING OFFICER USCGC Neversail			(OBC 12345B)		RPT NLT 94 JAN 22			
1000000000	State and the	schools to	BCN 1234567)	100			
	R CONSTITUTES A PERMANEN NEW LONDON, CT	T CHANGE OF STAT		PORTSMOU	TH, VA	7.7.7		
FROM	NT STATION REMAINS	-	то		-			
C. SUBMIT A	NEW CG-3698, OFFICER ASSIGN			ISTED ASSIG	NMENT/	ATA FORM, AS		
5. UPON COMPLI	E, IN ACCORDANCE WITH CUR ETION OF THIS TEMPORARY A AR DUTIES. USIST/REVISIT	DOITIONAL DUTY,	YOU WILL REYUR					
6. DELAY AUTHORIZED				THE STREET STREET	the second second			
7. LEAVE (Address/Phone)			RECORDS DISPOS	TITLON.	vice:	MAILED		
			PAYL			PPC		
						MAILED		
APPROPRIATION	OPERATING GUIDE		The second second					
6940201		SEE BELOW			-	PROJECT NUMBER		
	IZED ON DINECTED AS INDICA			The state of the s	-			
. a. FOR ENLIS	TEO PERSONNEL PERMANENT	CHANGE OF STATE	ON ONLY (Includit		duty en ro	utej: TRAVEL SY		
	Y OWNED CONVEYANCE IS AU		the same of the sa	The same of the sa				
AVAILABL	IA GOVERNMENT TRANSPORT E. TRAVEL VIA COMMERCIAL E. FOR MAC, CLASS TWO PRIO	CARRIER IS AUTHO	MIZED WHEN GO					
ARE AVAI	DIRECTED BY COMMERCIAL (LABLE, OTHERWISE AT OWN E	CARRIER ON TRANS XPENSE, SUBJECT T	PORTATION REG O REIMBURSEME	NT,	N TRANS	PORTATION REQUESTS		
	T OWN EXPENSE IS AUTHORIZ privately owned conveyence.)	ED, SUBJECT TO RE	IMBURSEMENT. (This alone do	s not auth	orize Enlisted Personnel		
	ORARY ADDITIONAL DUTY OF by privately owned conveyance is:		advantageous to th	ne Governmen	t.			
The same of the sa	by privately owned conveyance is	The second secon	Company of the Compan	Andrew Control of the	and the second second second			
	ANDATORY ASSIGNMENT TO G					NEW COMMAND PRIOR TO		
12. ADDITIONAL INSTRI	UCTIONS				BIRTOR			
AUTHORIZED AUTHORIZED	: 6940201 2/P/ ADVANCE MILEAGE AND 30 DAYS NONCHARGEAB ME OF RECORDS: ANYTO	LE GRADUATION		0/2104				
13 DISTRIBUTION:	220.			10223880				
	-2/0), ACADEMY (PRU/F							
	R. K. GUARD, YNCS, USCG 93 DEC 22					NDON, CT		
PREVIOUS COLTION MA						SN 7330-01-GF2-55		

Figure 12C-35 CG-5131, Standard Travel Order for Military Personnel

APPLICATION FOR SHIPMENT AND / OR STORAGE OF PERSONAL PROPERTY [Before completing form, read Privacy Act Statement on reverse)				1. DATE PREPARED (YYMMOD) 2. SHIPMENT NUMBER 93 - NOV - 12 1/2				
3. NAME OF PREPARING OFFICE TRANSPORTATION OFFICE				sponsible on	igin Personal I	Property Shipping Office)		
USCG ACADEMY, NEW LON	ON. CT	C706320	a. NAME	DANICOCO	AMTON OF	ercen (er)		
S. NAME OF DESTINATION PERSONA						FICER (FL)		
T.O. USCG BASE, 196 TR			i, and	D.S. COAST CUARD ACADEMY				
CHARLESTON, SC 29401		,	1 1	o municipal	EN AVE			
6. MEMBER OR EMPLOYEE INFORMA	TION (SI	03) 724-7610	/7613	EW LOND	N, CT 06:	320		
a. NAME (Last, First, Middle Initial)	100	b. RANK / GR	ADE C SSN		ld. Al	GENCY		
Smithe, Sam N.		ENS/0-	1 123-1	2-1234	U.	.S. COAST GUARD		
7. REQUEST ACTION BE TAKEN TO 1	RANSPORT O	R STORE THE FOLL	OWING		1.0	TO THE COLUMN		
a. HOUSEHOLD GOODS/UNACCOMPANIED BAG	GAGE/ITEMS/NO.	OF CONTAINERS (Enter I	quantity estimate)					
(2)	(2) POUNDS OF PROFESSIONAL BOOKS, PAPERS			(3) EXPENSIVE AND VALUABLE ITEM				
(1) FOUNDS 1500 LBS	AND EQUIPMENT	(Enter name, if not applie	cable)			IMBER OF CARTONS		
b MOBILE HOME INFORMATION (Enter dimension	ins in feet and inch	es)						
(1) SERIAL NUMBER (2) CEN	GTH	(3) WIDTH	(4) HEIGHT	(5) TYPE EXP	ANDO (Describe)			
	tu bararan a	1		1				
(6) MOBILE HOME SERVICES REQUESTED (X as as	opticable)	(a)	Contents Packed			(b) Mobile Home Blocked		
(c) Mobile Hame Unblocked	100	560	Stored at Origin			(e) Stored at Destination		
B. THIS SHIPMENT/STORAGE IS REQ	UIRED INCIDEN	TO THE FOLLOW	WING CHANGE	OF STATION	ORDERS	Jan and a second and a		
TYPE ORDERS (X one)		a ISSUED BY			. NEW DUTY AS	SIGNMENT		
1) PERMANENT X (2) TEMPORAR		COMPT US	CG		CGC Neve	ersail, PORTSMOUTH, VA		
DATE OF DIGERS (YYMMOD)		NUMBER	1. PARAGRAM	H NO.	g. IN TRANSIT TELEPHONE NO. (Include Area Code)			
931104		234P12345			804	804 123-1234		
RT 1 BOX 1, ANYTOWN, 19. PICKUP (ORIGIN) INFORMATION								
. ADDRESS (Street, Address, City, County, State, a	and Zio Code)			NATION INF				
U.S. COAST GUARD ACADEMY (GSK) NEW LONDON, CT 06320				a. AOORESS (Street, Address, Gly, County, State, and Zip Code) If mobile home, also include mobile home court name) RT 1 BOX 1 ANYTOWN, NY 01234				
6. PHONE NUMBER (Include Area Code) (203) 444-1234			100	esignateo to	RECEIVE PROPER	TY		
11. EXTRA PICKUP/DELIVERY ADDRE	SS (If applicab	(e)						
12. SCHEDULED DATE (YYMMDO) FO		22 11 24						
13. REMARKS	R. PACE	93 Nov 24	a PCKUP	93 Nov	24	c DELIVERY 12/7/93		
14. I CERTIFY THAT NO OTHER SHIPP BELOW (If none, indicate "NONE."		DR NONTEMPORAR	Y STORAGE HA			HESE ORDERS EXCEPT AS INDICATE		
Fridm	6 10				Actual or est.)	d. POUNDS OF PROFESSIONAL BOOKS, PAPERS, EQUIPMENT (Actual or est.)		
				-	ACIDAL OF ENT.	PAPERS, EUDIPMENT (ACTUARD PEST)		
						-		
5. CERTIFICATION OF SHIPMENT RE	PONSIBILITIES	STORAGE CONDIT	TIONS.					
I Certify that I have read and under	stand my shipp	ing responsibilities	and storage cond	ditions printe	ed on the reve	rse side of this form		
SIGNATURE OF MEMBER/EMPLOYEE			B. DATE SENED			RACTOR (Street, City, State and Zip Code)		
NAME OF CONTRACTOR (Origin DPM or non-re	moorary trovage)							
16. CERTIFICATE IN LIEU OF SIGNATU goods, mobile home, and for profe	IRE ON THIS F	ORM IS REQUIRED papers and equipm	WHEN REGULA	ATIONS SO	AUTHORIZE.	Property is baggage, household		
REASON FOR NONAVACABILITY OF SIGNATUR		b. CERTIFIED BY (Signature)						
			c. THELE					
D Form 1299, DEC 85			Ettora	un lunn t t	005 -11	ous editions of this form are obsoless		

Figure 12C-36 DD-1299, Application for Shipment and/or Storage of Personal Property